

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/553805  
APPLICANT(S)

FILED DATE

26 SEP 2006

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	↓		2	↓		↓
TOTAL DEP.	←		13	←		←
TOTAL CLAIMS			15			

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51				/		
52				/		
53				/		
54				/		
55				/		
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TOTAL IND.	↓			↓		↓
TOTAL DEP.	←			←		←
TOTAL CLAIMS						